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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full nar		r full name		
	your pictu exar licer Bring iden	e the name that is on a government-issued ure identification (for mple, your driver's use or passport). g your picture tification to your ting with the trustee.	Toymesha First name N Middle name Sanders Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	use Inclu	other names you have d in the last 8 years ude your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security aber or federal vidual Taxpayer utification number	xxx-xx-3429	

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Debtor 1 Toymesha N Sanders

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and	■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)			
doing business as names	EINs	EINs			
Where you live		If Debtor 2 lives at a different address:			
	924 Ridgefield Lane Wheeling, IL 60090 Number, Street, City, State & ZIP Code Lake County If your mailing address is different from the one above, fill it in here. Note that the court will send any	Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this			
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			
	Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Where you live Why you are choosing this district to file for	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Business name(s) Business name(s) EINs Where you live 924 Ridgefield Lane Wheeling, IL 60090 Number, Street, City, State & ZIP Code Lake County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing this district to file for bankruptcy Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason.			

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Document Case number (if known) Debtor 1 Toymesha N Sanders

Par	Tell the Court About	our Ba	ankruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. □ Chapter 7						
	choosing to file under							
		☐ Ch	napter 11					
		□ Ch	napter 12					
		■ Ch	napter 13					
8.	How you will pay the fee		I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.					
			I need to pay	the fee in installments. If		e this option, sigr	and attach the Applica	ation for Individuals to Pay
			•	e in Installments (Official Fo	,	this option only i	f you are filing for Char	stor 7. By law, a judga may
		_	but is not requ	t my fee be waived (You m uired to, waive your fee, and Ir family size and you are un	may do so	only if your inco	me is less than 150% o	of the official poverty line that
				n to Have the Chapter 7 Fili				
9.	Have you filed for bankruptcy within the last 8 years?	□ No ■ Yes						
			o.	Kansas Missouri				
			District	Western	When	1/28/13	Case number	13-40264
			District	Kansas Missouri	When	3/03/11	Case number	11-40857
				Western	When	3/03/11		11 40007
			District		when		Case number	
10.	Are any bankruptcy	■ No						
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	S.					
	aiiiiate :		Debtor				Relationship to y	/ OU
			District		When		Case number, if	-
			Debtor				Relationship to y	
			District		When		Case number, if	
11.	Do you rent your residence?	■ No	. Go to li	ne 12.				
		☐ Ye	s. Has yo	ur landlord obtained an evic	tion judgm	ent against you a	and do you want to stay	in your residence?
				No. Go to line 12.				
				Yes. Fill out <i>Initial Statemen</i> bankruptcy petition.	nt About ar	n Eviction Judgm	ent Against You (Form	101A) and file it with this

Document Page 4 of 68 Case number (if known) Debtor 1 Toymesha N Sanders Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard?

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Toymesha N Sanders

nders Case number (if known)

15. Tell the court whether you have received a briefing about credit

counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 1 Toymesha N Sand	ders	Documen	t Page 6 of 68	(if known)		
Part	6: Answer These Quest	ions for R	Reporting Purposes				
	What kind of debts do you have?	16a.					
	,		□ No. Go to line 16b.	iai, iaimy, or neddoriola parpodo.			
			Yes. Go to line 17.				
		16b.	Are your debts primarily bus	iness debts? Business debts are debts t			
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you ow	e that are not consumer debts or busines:	s debts		
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7	. Go to line 18.			
	Do you estimate that after any exempt property is excluded and	☐ Yes.		you estimate that after any exempt properlable to distribute to unsecured creditors?	erty is excluded and administrative expenses		
	administrative expenses		□ No				
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes				
18.	How many Creditors do	1 -49		□ 1,000-5,000	☐ 25,001-50,000		
	you estimate that you owe?	□ 50-99)	5001-10,000	5 50,001-100,000		
		☐ 100-1 ☐ 200-9		□ 10,001-25,000	☐ More than100,000		
19.	How much do you	\$ 0 - \$	\$50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?		001 - \$100,000	☐ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion		
	be worth?		,001 - \$500,000 ,001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
20.	How much do you	□ \$0 - \$	\$50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion		
			,001 - \$500,000 ,001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
		□ \$500	,001 - \$1 million	Δ ψ100,000,001 ψ000 mimon	— More than 400 billion		
Part	7: Sign Below						
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.					
				am aware that I may proceed, if eligible, ef available under each chapter, and I ch			
				t pay or agree to pay someone who is not notice required by 11 U.S.C. § 342(b).	an attorney to help me fill out this		
		I reques	t relief in accordance with the cha	apter of title 11, United States Code, spec	sified in this petition.		
		bankrup and 357	tcy case can result in fines up to	oncealing property, or obtaining money o \$250,000, or imprisonment for up to 20 ye	r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519		
		Toyme	sha N Sanders	Signature of Debtor	2		
		Signatur	e of Debtor 1				

Executed on June 9, 2017

MM / DD / YYYY

Executed on

MM / DD / YYYY

Debtor 1 Toymesha N Sanders Document Page 7 of 68 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ David H. Cutler	Date	June 9, 2017	
Signature of Attorney for Debtor		MM / DD / YYYY	
David H. Cutler Printed name			
Cutler & Associates, Ltd			
4131 Main Street			
Skokie, IL 60076			
Number, Street, City, State & ZIP Code			
Contact phone 847-673-8600	Email address	david@cutlerltd.com	
Bar number & State			

		Docume	ent Page 8 of 68	
Fill in this inform	mation to identify your	case:		
Debtor 1	Toymesha N San	ders		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	inkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				☐ Check if this is an
				amended filing
				amended ming

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	11: Summarize Your Assets		
		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	28,870.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	28,870.00
Par	2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	19,283.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	93,332.00
	Your total liabilities	\$	112,615.00
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,231.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,031.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a bounded purpose." 14 LLS C. \$ 104(9). Fill purblings 8.0g for stellistical purposes. 28 LLS C. \$ 150	a personal	, family, or

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Debtor 1 Toymesha N Sanders

Document Page 9 of 68
Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____5,300.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	72,040.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	72,040.00

`	0000 17 17701 200	Document	Page 10 of 68	1 10.14.02 00	30 Man
Fill in this inf	ormation to identify your case				
Debtor 1	Toymesha N Sanders				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the: NOR	THERN DISTRICT OF ILL	INOIS		
Case number			_		☐ Check if this is an amended filing
Official F	Form 106A/B				
_	ule A/B: Propert	:V			12/15
hink it fits best nformation. If n Answer every q	y, separately list and describe item: . Be as complete and accurate as portion in a separate is needed, attach a separatestion. ibe Each Residence, Building, Land	possible. If two married peop arate sheet to this form. On t	ole are filing together, both are he top of any additional pages	equally responsible for su	pplying correct
. Do you own	or have any legal or equitable intere	est in any residence, building	g, land, or similar property?		
■ No. Go to	Part 2				
_	re is the property?				
Part 2: Descri	ibe Your Vehicles				
B. Cars, vans □ No ■ Yes	, trucks, tractors, sport utility v	ehicles, motorcycles			
3.1 Make: Model:	Nissian Pathfinder Armada 2WDR	Who has an interest in t Debtor 1 only	he property? Check one	Do not deduct secured class the amount of any secure Creditors Who Have Claim	d claims on Schedule D:
Year:	2004	Debtor 2 only		Current value of the	Current value of the
	mate mileage: 160000 formation:	☐ Debtor 1 and Debtor 2 ☐ At least one of the debtor 2	•	entire property?	portion you own?
	d via NADA Clean Retail	At least one of the det	otors and another	•	
driving car for	via 6/9/17. Car is being g by son, who needs the r school and part time responsibilities.	Check if this is comr (see instructions)	nunity property	\$6,775.00	\$6,775.00
3.2 Make:	Nissian	Who has an interest in t	he property? Check one	Do not deduct secured cl	
Model:	Murano	■ Debtor 1 only		the amount of any secure Creditors Who Have Clair	
Year:	2009	Debtor 2 only		Current value of the	Current value of the
	mate mileage: 112,000	Debtor 1 and Debtor 2		entire property?	portion you own?
	formation:	At least one of the deb	otors and another		
3/17	d via Purchase Price on	Check if this is comr	munity property	\$8,900.00	\$8,900.00

Official Form 106A/B Schedule A/B: Property page 1

Deb	tor 1	Toymesha N	Sanders	Document	Page 11 of 68	er (if known)	
						, ,	
					eles, other vehicles, and access owmobiles, motorcycle accessori		
	No						
	Yes						
					om Part 2, including any entries		\$15,675.00
.p	ages y	ou nave attache	d for Part 2. Write that n	umber nere		=>	<u> </u>
Port	21 Doo	oribo Vour Boroor	nal and Household Items				
			gal or equitable interest	in any of the followi	ng items?		Current value of the
,	, 0	or mave any ic	gar or oquitable interest	in any or the femous	g		portion you own?
							Do not deduct secured
6. H e	ouseho	old goods and fu	ırnishings				claims or exemptions.
Ε	xample	es: Major appliand	ces, furniture, linens, china	a, kitchenware			
	l No						
	Yes.	Describe					
			Various used bouse	hald furnishings a	nd personal items at	\neg	
					sofas, 1 coffee table, 1 sma	all	
					ook shelves, 2 lamps, 1		
			dresser.				\$1,500.00
7. EI	lectroni	ics					
Е	xample				ment; computers, printers, scann	ners; music c	ollections; electronic devices
_] No	including cell	phones, cameras, media	players, games			
		Describe					
	165.	Describe					
			Various small used	electronics at liqui	dated values including: 1		
				1 TV, 1 Ipad, 1 pla	y station, 1 microwave, 1		* 000.00
			coffee maker.				\$900.00
		les of value					
Е	xample		figurines; paintings, prints ns, memorabilia, collectib		ks, pictures, or other art objects;	stamp, coin,	or baseball card collections;
	No	other collection	ins, memorabilia, collectib	163			
_		Describe					
		ent for sports an		or hobby aguinment: h	picycles, pool tables, golf clubs, s	kie: canooe	and kayake: carpontry tools:
_	лапіріє	musical instru		er nobby equipment, t	orcycles, poor tables, golf clubs, s	ikis, carioes	and kayaks, carpentry tools,
	No						
	Yes.	Describe					
40.							
-	Firearm <i>Examp</i>		, shotguns, ammunition, a	ind related equipment			
_	■ No		, 5.1.5.194.1.5, 4.1.1.14.11.11.51.1, 5	a roiatoa oquipinoni			
_		Describe					
	Clothes		thes, furs, leather coats, o	designer wear shoos	accessories		
_	<i>⊑xampı</i>] No	.00. Everyday clu	anos, rais, icamier cuais, t	acoignoi wear, silues,	40000001100		
_	_	Describe					
	. 55.						
			Various used clothe	S			\$100.00

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Case number (if known) Document **Toymesha N Sanders** Debtor 1 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... \$500.00 1 wedding ring at liquidated value 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$3.000.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Cash \$50.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: Yes..... Checking **TCF** \$50.00 **PNC** \$0.00 Checking 17 2 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them.....

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Name of entity:

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.

Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

■ No

☐ Yes. Give specific information about them

% of ownership:

Debtor 1	Toymesha N Sanders	Document	Page 13 of 68 Case number (if known	m)
	Issuer name:			
	ement or pension accounts nples: Interests in IRA, ERISA, Keogh, 401((k), 403(b), thrift savir	ngs accounts, or other pension or profit-sharin	ng plans
■ Yes	s. List each account separately. Type of account:	Institution	name:	
	401k	Employ	er Sponsered	\$6,500.00
		•	ces shares of stock in account for account can not be liquidated for at rrs	\$2,100.00
Your	rity deposits and prepayments share of all unused deposits you have mad mples: Agreements with landlords, prepaid r		entinue service or use from a company ectric, gas, water), telecommunications comp	panies, or others
_	S	Institution	name or individual:	
	Security Deposit	Landlor	d	\$1,495.00
■ No □ Yes 24. Interee 26 U.s ■ No □ Yes 25. Truss ■ No □ Yes 26. Pater Exar ■ No □ Yes 27. Licer Exar ■ No □ Yes	Institution name and descripts, equitable or future interests in properties. Give specific information about them Institution name and descripts, equitable or future interests in properties. Give specific information about them Internet domain names, websites, properties. Give specific information about them Internet domain names, websites, properties, great information about them Internet domain names and other general intances and other general intances.	in a qualified ABLE projection. Separately file ty (other than anythes, and other intellectoceeds from royalties)	rogram, or under a qualified state tuition put the records of any interests.11 U.S.C. § 521(ing listed in line 1), and rights or powers estual property	(c): exercisable for your benefit
,	,			portion you own? Do not deduct secured claims or exemptions.
■ No	efunds owed to you s. Give specific information about them, incl	uding whether you al	ready filed the returns and the tax years	
Exar ■ No	ly support mples: Past due or lump sum alimony, spous	sal support, child sup	port, maintenance, divorce settlement, prope	erty settlement

De	ebtor 1 Toymesha N Sando	Document	Page 14 of 68 Case number (if known)	Desc Main
		ability insurance payments, disability be ans you made to someone else	enefits, sick pay, vacation pay, workers' comper	nsation, Social Security
	Interests in insurance policies	es	(4104)	
	■ No	r life insurance; nealth savings account	t (HSA); credit, homeowner's, or renter's insuran	ice
	☐ Yes. Name the insurance con	mpany of each policy and list its value. company name:	Beneficiary:	Surrender or refund value:
		is due you from someone who has diving trust, expect proceeds from a life	lied insurance policy, or are currently entitled to rece	eive property because
	☐ Yes. Give specific information	n		
		whether or not you have filed a laws ment disputes, insurance claims, or righ		
34.	Other contingent and unliquid	dated claims of every nature, includ	ing counterclaims of the debtor and rights to	set off claims
	■ No □ Yes. Describe each claim	,		
35.	Any financial assets you did r	not already list		
	■ No			
	☐ Yes. Give specific information	n		
36		f your entries from Part 4, including r here	any entries for pages you have attached	\$10,195.00
Pa	rt 5: Describe Any Business-Rela	ated Property You Own or Have an Interes	st In. List any real estate in Part 1.	
37.	Do you own or have any legal or e	equitable interest in any business-related	property?	
I	No. Go to Part 6.			
	Yes. Go to line 38.			
Pa	rt 6: Describe Any Farm- and Com If you own or have an interest i	mmercial Fishing-Related Property You O in farmland, list it in Part 1.	own or Have an Interest In.	
46.	Do you own or have any legal No. Go to Part 7.	l or equitable interest in any farm- o	r commercial fishing-related property?	
	☐ Yes. Go to line 47.			
Pa	Tt 7: Describe All Property Yo	ou Own or Have an Interest in That You D	Did Not List Above	
53.	Do you have other property of Examples: Season tickets, cou	of any kind you did not already list?		
	No			

Official Form 106A/B Schedule A/B: Property page 5

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

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Case number (if known) Document Debtor 1 **Toymesha N Sanders**

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$15,675.00		
57.	Part 3: Total personal and household items, line 15	\$3,000.00		
58.	Part 4: Total financial assets, line 36	\$10,195.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$28,870.00	Copy personal property total	\$28,870.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$28,870.00

Official Form 106A/B Schedule A/B: Property page 6

131	I in this inform	ation to identify your case:	Document		Page 16 of 68	
De	btor 1	Toymesha N Sanders				
_	h.t 0	First Name	Middle Name	L	ast Name	
	btor 2 ouse if, filing)	First Name	Middle Name	L	ast Name	
Un	ited States Ban	kruptcy Court for the: NOR	THERN DISTRICT OF	ILLIN	OIS	
Ca	se number					
	nown)					☐ Check if this is an amended filing
0	fficial For	m 106C				
S	chedule	C: The Prope	rty You Cla	im	as Exempt	4/16
the nee	property you lis	ted on Schedule A/B: Property attach to this page as many of	y (Official Form 106A/B)	as yo	our source, list the property that you	or supplying correct information. Using claim as exempt. If more space is additional pages, write your name and
spe any fun exe	cific dollar am applicable sta ds—may be ur mption to a pa	ount as exempt. Alternative atutory limit. Some exemptio nlimited in dollar amount. Ho	ly, you may claim the fons—such as those for owever, if you claim an	ull fai heal exen	ir market value of the property be th aids, rights to receive certain b nption of 100% of fair market valu	One way of doing so is to state a ing exempted up to the amount of penefits, and tax-exempt retirement the under a law that limits the t, your exemption would be limited
_	rt 1: Identify	the Property You Claim as	Exempt			
Pa	identili)	<u> </u>				
		exemptions are you claiming	g? Check one only, eve	n if yo	our spouse is filing with you.	
	Which set of	exemptions are you claiming iming state and federal nonba	•	•	, ,	
	Which set of ■ You are cla		nkruptcy exemptions.	•	, ,	
1.	Which set of ■ You are cla □ You are cla	iming state and federal nonba	nkruptcy exemptions. U.S.C. § 522(b)(2)	11 U.S	, ,	
1.	Which set of ■ You are cla □ You are cla For any prope Brief description	iming state and federal nonba	nkruptcy exemptions. U.S.C. § 522(b)(2)	11 U.S	S.C. § 522(b)(3)	Specific laws that allow exemption
1.	Which set of ■ You are cla □ You are cla For any prope Brief description	iming state and federal nonba iming federal exemptions. 11 erty you list on Schedule A/L on of the property and line on	nkruptcy exemptions. U.S.C. § 522(b)(2) 3 that you claim as execurrent value of the	empt,	S.C. § 522(b)(3) fill in the information below.	Specific laws that allow exemption
1.	Which set of ■ You are cla □ You are cla For any prope Brief description Schedule A/B to	iming state and federal nonba iming federal exemptions. 11 erty you list on Schedule A/I on of the property and line on hat lists this property	nkruptcy exemptions. U.S.C. § 522(b)(2) 3 that you claim as exe Current value of the portion you own Copy the value from	empt,	fill in the information below.	Specific laws that allow exemption 735 ILCS 5/12-1001(a)
1.	Which set of ■ You are cla □ You are cla For any prope Brief description Schedule A/B to	iming state and federal nonba iming federal exemptions. 11 erty you list on Schedule A/L on of the property and line on hat lists this property	nkruptcy exemptions. U.S.C. § 522(b)(2) B that you claim as execure to the portion you own Copy the value from Schedule A/B	empt,	fill in the information below. ount of the exemption you claim eck only one box for each exemption.	
1.	Which set of ■ You are cla □ You are cla For any prope Brief description Schedule A/B to Various use Line from Sche 401k: Emplo	iming state and federal nonba iming federal exemptions. 11 erty you list on Schedule A/b on of the property and line on hat lists this property d clothes edule A/B: 11.1	nkruptcy exemptions. U.S.C. § 522(b)(2) B that you claim as execure to the portion you own Copy the value from Schedule A/B	empt, Ame	fill in the information below. ount of the exemption you claim eck only one box for each exemption. \$100.00 100% of fair market value, up to	
1.	Which set of ■ You are cla □ You are cla For any prope Brief description Schedule A/B to Various use Line from Sche 401k: Emplo	iming state and federal nonba iming federal exemptions. 11 erty you list on <i>Schedule A/I</i> on of the property and line on hat lists this property d clothes edule A/B: 11.1	nkruptcy exemptions. U.S.C. § 522(b)(2) 8 that you claim as execute control value of the portion you own Copy the value from Schedule A/B \$100.00	empt, Ame	fill in the information below. ount of the exemption you claim eck only one box for each exemption. \$100.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)
1.	Which set of ■ You are cla □ You are cla For any prope Brief description Schedule A/B to Various use Line from Sche Line from Sche Line from Sche UPS places	iming state and federal nonbal iming federal exemptions. 11 erty you list on Schedule A/B on of the property and line on that lists this property and line on that lists this property and line on that lists this property and clothes the edule A/B: 11.1 every sponsered to be a sponse	nkruptcy exemptions. U.S.C. § 522(b)(2) 8 that you claim as execute control value of the portion you own Copy the value from Schedule A/B \$100.00	empt, Ama	fill in the information below. ount of the exemption you claim eck only one box for each exemption. \$100.00 100% of fair market value, up to any applicable statutory limit \$6,500.00 100% of fair market value, up to	735 ILCS 5/12-1001(a)
1.	Which set of ■ You are cla □ You are cla For any prope Brief description Schedule A/B to Various use Line from Sche 401k: Emplo Line from Sche UPS places account for be liquidate	iming state and federal nonbal iming federal exemptions. 11 erty you list on Schedule A/B on of the property and line on that lists this property and line on that lists this property and line on that lists this property and clothes the edule A/B: 11.1	nkruptcy exemptions. U.S.C. § 522(b)(2) B that you claim as execute current value of the portion you own Copy the value from Schedule A/B \$100.00	empt, Ama	fill in the information below. ount of the exemption you claim eck only one box for each exemption. \$100.00 100% of fair market value, up to any applicable statutory limit \$6,500.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a) 735 ILCS 5/12-1006
1.	Which set of You are cla You are cla For any prope Brief descriptio Schedule A/B to Various use Line from Sche 401k: Emplo Line from Sche UPS places account for be liquidate Line from Sche Security De	iming state and federal nonbal iming federal exemptions. 11 erty you list on Schedule A/B on of the property and line on that lists this property and line on the list lists this property and line on the lis	nkruptcy exemptions. U.S.C. § 522(b)(2) B that you claim as execute current value of the portion you own Copy the value from Schedule A/B \$100.00	American Chee	fill in the information below. ount of the exemption you claim eck only one box for each exemption. \$100.00 100% of fair market value, up to any applicable statutory limit \$6,500.00 100% of fair market value, up to any applicable statutory limit \$2,100.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a) 735 ILCS 5/12-1006

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustm	sumeni.
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Official Form 106C

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

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Debtor 1 Toymesha N Sanders

		Document	Page 18	of 68		
Fill in this informa	ation to identify you	ır case:				
Debtor 1	Toymesha N Sa	inders				
	First Name	Middle Name	Last Name		-	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		-	
(Spouse II, IIIIng)	First Name	middle Name	Last Name			
United States Bank	kruptcy Court for the:	NORTHERN DISTRICT OF ILL	INOIS		-	
Case number						
(if known)					☐ Check	if this is an
					ameno	ded filing
Official Form	106D					
			^	l las a Dagasa a sat		
Schedule L	D: Creditors	Who Have Claims	<u>secured</u>	by Propert	<u>y </u>	12/15
		If two married people are filing togethe out, number the entries, and attach it t				
number (if known).						
1. Do any creditors h	ave claims secured by	y your property?				
☐ No. Check t	his box and submit t	his form to the court with your other	schedules. Yo	ou have nothing else t	to report on this form.	
Yes. Fill in a	all of the information	below.				
Part 1: List All	Secured Claims					
2. List all secured cl	laims. If a creditor has i	more than one secured claim, list the cred	ditor separately	Column A	Column B	Column C
		s a particular claim, list the other creditors cal order according to the creditor's name		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Credit Acce	eptance	Describe the property that secures t	he claim:	\$7,751.00	\$6,775.00	\$976.00
Creditor's Name		2004 Nissian Pathfinder Arm	ada			
		2WDR 160000 miles	il Value			
		Valued via NADA Clean Reta via 6/9/17. Car is being drivi				
		son, who needs the car for s				
25505 Wes	t 12 Mile Rd	and part time work responsi	bilities.			
Suite 3000		As of the date you file, the claim is: (apply.	Check all that			
Southfield,	MI 48034	☐ Contingent				
Number, Street, C	City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the deb	t? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as n	nortgage or sec	ured		
Debtor 2 only		car loan)				
☐ Debtor 1 and Deb☐ At least one of the		☐ Statutory lien (such as tax lien, med☐ Judgment lien from a lawsuit	hanic's lien)			
☐ Check if this clai		☐ Other (including a right to offset)				
community deb		Other (including a right to onset)				
	Opened					
	07/13 Last					
	Active					
Date debt was incur	red 2/27/17	Last 4 digits of account numb	oer 3365			
				*	4	
2.2 Honor Fina Creditor's Name	ince	Describe the property that secures to		\$11,532.00	\$8,900.00	\$2,632.00
Creditor 5 Name		2009 Nissian Murano 112,000 Valued via Purchase Price of				
909 Davis S	St Sta 260	As of the date you file, the claim is:				
Evanston,		apply.				
	City, State & Zip Code	☐ Contingent☐ Unliquidated				
. rambor, oneet, c	,, J u zip 0000	☐ Disputed				
Who owes the deb	t? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		■ An agreement you made (such as n	nortgage or sec	ured		
Debtor 2 only		car loan)				
☐ Debtor 1 and Deb	tor 2 only	☐ Statutory lien (such as tax lien, med	chanic's lien)			

Official Form 106D

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Debtor 1 Toymesh	a N Sanders		(Case number (if know)	
First Name	Middle N	ame Last Name		•	
☐ At least one of the de☐ Check if this claim community debt		☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)			
Date debt was incurred	Opened 02/17 Last Active 3/27/17	Last 4 digits of account number	1001		
	•	column A on this page. Write that number h	ere:	\$19,283.0	
Write that number he		and donar variab totals from an pages.		\$19,283.0	0

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

		Document	Page 20) of 68		
Fill in th	is information to identify your c	ase:				
Debtor 1	Toymesha N Sand	ers				
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, t	filing) First Name	Middle Name	Last Name			
	•					
United S	tates Bankruptcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS			
Case nur (if known)	mber				_	eck if this is an ended filing
Officia	I Form 106E/F					
	lule E/F: Creditors WI	ho Have Unsecured	Claims			12/15
ny execu Schedule Schedule I eft. Attach	plete and accurate as possible. Use tory contracts or unexpired leases t G: Executory Contracts and Unexpir D: Creditors Who Have Claims Secunthe Continuation Page to this page case number (if known).	hat could result in a claim. Also I ed Leases (Official Form 106G). I red by Property. If more space is . If you have no information to re	ist executory o o not include needed, copy t	ontracts on Schedule A/B: Prop any creditors with partially secon he Part you need, fill it out, nur	perty (Official ured claims tl nber the entri	Form 106A/B) and on nat are listed in es in the boxes on the
Part 1:	List All of Your PRIORITY Uns					
_	ny creditors have priority unsecured	claims against you?				
	o. Go to Part 2.					
☐ Ye	_					
Part 2:	List All of Your NONPRIORITY					
	ny creditors have nonpriority unsecu					
	b. You have nothing to report in this pa	rt. Submit this form to the court with	your other sche	dules.		
■ Ye	es.					
unsec	Ill of your nonpriority unsecured clair cured claim, list the creditor separately one creditor holds a particular claim, lis	for each claim. For each claim listed	l, identify what t	ype of claim it is. Do not list claims	s already inclu	ded in Part 1. If more
ranz						Total claim
	AMCOL Systems, Inc.	Last 4 digits of acc	ount number	1896		\$443.00
F	Nonpriority Creditor's Name Amcol Systems, Inc. Po Box 21625	When was the debt	incurred?	Opened 11/15		
1	Columbia, SC 29221 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you	file, the claim i	s: Check all that apply		
ı	Debtor 1 only	☐ Contingent				
[Debtor 2 only	☐ Unliquidated				
[Debtor 1 and Debtor 2 only	☐ Disputed				
[$\operatorname{\beth}$ At least one of the debtors and anot	her Type of NONPRIOR	RITY unsecured	l claim:		
	☐ Check if this claim is for a comm	•				
	lebt s the claim subject to offset?	Obligations arising report as priority clain		ration agreement or divorce that y	ou did not	
_	■ No	<u>.</u> ' ' '		g plans, and other similar debts		
Γ	Yes	Other. Specify	Collection A Emergency	Attorney First Choice Room		

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AMCOL Systems, Inc.	Last 4 digits of account number	3766	\$173.00
Nonpriority Creditor's Name Amcol Systems, Inc. Po Box 21625	When was the debt incurred?	Opened 01/16	VIII
Columbia, SC 29221 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify Collection Emergency	Attorney First Choice Room	
Choice Recovery Inc	Last 4 digits of account number	8504	\$195.00
Nonpriority Creditor's Name 1550 Old Henderson Rd Ste 100 Columus, OH 43220	When was the debt incurred?	Opened 7/28/14	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify Collection	Attorney Advanced Dermatology	
Choice Recovery Inc	Last 4 digits of account number	0623	\$15.00
Nonpriority Creditor's Name 1550 Old Henderson Rd Ste 100 Columus, OH 43220	When was the debt incurred?	Opened 05/16	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
_			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed	d alatan	
At least one of the debtors and another	Type of NONPRIORITY unsecure	g ciaim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharir	on plans, and other similar debts	
☐ Yes	Other. Specify Collection	Attorney Advanced Dermatology	

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loymesna N Sanders	Case number (if know)	
Credit Collections Svc	Last 4 digits of account number 1429	\$121.00
Nonpriority Creditor's Name Po Box 773	When was the debt incurred? Opened 01/14	
Needham, MA 02494	<u> </u>	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Collection Attorney Progressive	
Credit Management, LP	Last 4 digits of account number 5144	\$326.00
Nonpriority Creditor's Name	When we the debt in sured Opened 02/47	
The Offices of Credit Management, LP	When was the debt incurred? Opened 02/17	
Po Box 118288		
Carrolton, TX 75011	-	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	Continued	
Debtor 2 only	☐ Contingent ☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Collection Attorney Wow Schaumburg	
Credit Systems International, Inc	Last 4 digits of account number 6853	\$240.00
Nonpriority Creditor's Name 1277 Country Club Lane	When was the debt incurred? Opened 09/16	
Fort Worth, TX 76112	Opened 03/10	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	□ Debts to pension or profit-sharing plans, and other similar debts	
<u> </u>	_ Collection Attorney Keller Family Medical	
□Yes	Other. Specify Center	

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Debtor 1 Toymesha N Sanders Case number (if know) 4.8 \$2,100.00 Daniel J. Lee Last 4 digits of account number Nonpriority Creditor's Name c/o Kimberly J. Weissman, LLC When was the debt incurred? 633 Skokie Blvd Suite 400 Northbrook, IL 60062 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No 16M3004912 ☐ Yes Other. Specify 4.9 **Dept Of Ed/Navient** Last 4 digits of account number 0901 \$18,540.00 Nonpriority Creditor's Name Attn: Claims Dept Opened 09/16 Last Active P.O. Box 9635 When was the debt incurred? 5/31/17 Wilkes Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify **Educational** 4.1 **Dept Of Ed/Navient** 0816 \$6,382.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Attn: Claims Dept Opened 08/10 Last Active P.O. Box 9635 When was the debt incurred? 4/29/13 Wilkes Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational

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Debtor 1 Toymesha N Sanders Case number (if know) 4.1 Dept Of Ed/Navient 0819 \$6,290.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Claims Dept Opened 08/09 Last Active P.O. Box 9635 When was the debt incurred? 4/29/13 Wilkes Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.1 Dept Of Ed/Navient 0830 \$6,162.00 Last 4 digits of account number 2 Nonpriority Creditor's Name Attn: Claims Dept Opened 08/11 Last Active P.O. Box 9635 When was the debt incurred? 4/29/13 Wilkes Barr, PA 18773 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Educational 4.1 Dept Of Ed/Navient 0816 \$5,943.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Claims Dept Opened 08/10 Last Active P.O. Box 9635 When was the debt incurred? 4/29/13 Wilkes Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes ☐ Other. Specify

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Case number (if know) Debtor 1 Toymesha N Sanders 4.1 **Dept Of Ed/Navient** 0131 \$5,511.00 Last 4 digits of account number 4 Nonpriority Creditor's Name Attn: Claims Dept Opened 01/12 Last Active P.O. Box 9635 When was the debt incurred? 4/29/13 Wilkes Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.1 Dept Of Ed/Navient 0819 \$5,404.00 Last 4 digits of account number 5 Nonpriority Creditor's Name Attn: Claims Dept Opened 08/09 Last Active P.O. Box 9635 When was the debt incurred? 4/29/13 Wilkes Barr, PA 18773 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Educational 4.1 Dept Of Ed/Navient 1015 \$3,678.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Claims Dept Opened 10/13 Last Active P.O. Box 9635 When was the debt incurred? 5/31/17 Wilkes Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes ☐ Other. Specify

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Case number (if know) Debtor 1 Toymesha N Sanders 4.1 **Dept Of Ed/Navient** 0914 \$3,142.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Claims Dept Opened 09/09 Last Active P.O. Box 9635 When was the debt incurred? 4/29/13 Wilkes Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.1 Dept Of Ed/Navient 0606 \$2,880.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Attn: Claims Dept Opened 06/11 Last Active P.O. Box 9635 When was the debt incurred? 4/29/13 Wilkes Barr, PA 18773 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Educational 4.1 Dept Of Ed/Navient 0830 \$2,793.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Claims Dept Opened 08/11 Last Active P.O. Box 9635 When was the debt incurred? 4/29/13 Wilkes Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes ☐ Other. Specify

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Case number (if know)

Debtor 1 Toymesha N Sanders 4.2 Dept Of Ed/Navient 0705 \$2,353.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Attn: Claims Dept Opened 07/12 Last Active P.O. Box 9635 When was the debt incurred? 4/29/13 Wilkes Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.2 Dept Of Ed/Navient 0705 \$1,566.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Claims Dept Opened 07/12 Last Active P.O. Box 9635 When was the debt incurred? 4/29/13 Wilkes Barr, PA 18773 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Educational 4.2 Dept Of Ed/Navient 0830 \$1,396.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 08/11 Last Active Attn: Claims Dept P.O. Box 9635 When was the debt incurred? 4/29/13 Wilkes Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes ☐ Other. Specify

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Debtor 1 Toymesha N Sanders Case number (if know) 4.2 \$468.00 **Diversified Consultant** 6500 Last 4 digits of account number 3 Nonpriority Creditor's Name Dci When was the debt incurred? **Opened 01/17** Po Box 551268 Jacksonville, FL 32255 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other, Specify Collection Attorney At T 4.2 Fecu 0101 \$781.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 01/16 Last Active 1617 W 7th St When was the debt incurred? 7/31/16 Fort Worth, TX 76102 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Deposit Related** Other. Specify 4.2 **Fst Premier** \$342.00 8209 Last 4 digits of account number Nonpriority Creditor's Name Opened 8/07/09 Last Active 601 S Minneaoplis Ave When was the debt incurred? 12/26/10 Sioux Falls, SD 57104 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card

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Covmesha N Sanders

Covmesha N Sanders

Debtor	1 Toymesha N Sanders		Case number (if know)			
4.2 6	IC Systems, Inc	Last 4 digits of account number	4001	\$1,029.00		
	Nonpriority Creditor's Name 444 Highway 96 East St Paul, MN 55127	When was the debt incurred?	Opened 05/15			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	☐ Yes	■ Other. Specify Collection	Attorney T Mobile Usa Inc			
4.2	Keynote Consulting	Last 4 digits of account number	2993	\$586.00		
	Nonpriority Creditor's Name			********		
	220 West Campus Drive Suite 102	When was the debt incurred?	Opened 07/15			
	Arlington Heights, IL 60004					
	Number Street City State Zlp Code	As of the date you file, the claim				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	\square Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	oligations arising out of a separation agreement or divorce that you did not as priority claims			
	No	Debts to pension or profit-sharing				
	Yes	■ Other. Specify Jacqueline	Attorney Rosen Dds M.S.			
4.2	Mage & Price	Last 4 digits of account number	0001	\$9,456.00		
	Nonpriority Creditor's Name 1110 W Lake Cooke Rd Buffalo Grove, IL 60089	When was the debt incurred?	Opened 9/02/15			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt		ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharing				
	Yes	■ Other Specify 15M300754	6			

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Debtor 1 Toymesha N Sanders Case number (if know) 4.2 \$118.00 Med Business Bureau 6677 Last 4 digits of account number 9 Nonpriority Creditor's Name 1460 Renaissance Dr #400 When was the debt incurred? **Opened 10/15** Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Compass Healthcare** ☐ Yes Other. Specify Consultan 4.3 \$59.00 Med Business Bureau 6676 Last 4 digits of account number 0 Nonpriority Creditor's Name 1460 Renaissance Dr #400 When was the debt incurred? **Opened 10/15** Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Compass Healthcare** ☐ Yes Other. Specify Consultan 4.3 Mercantile Adjustment Bureau 5602 \$1,537.00 Last 4 digits of account number Nonpriority Creditor's Name 165 Lawrence Bell Dr Ste 100 When was the debt incurred? **Opened 07/16** Williamsville, NY 14221 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney Reliant Energy Retail ☐ Yes

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Case number (if know)

Debtor 1 Toymesha N Sanders 4.3 \$605.00 **Merchants Credit** 2415 Last 4 digits of account number 2 Nonpriority Creditor's Name 223 W Jackson Blvd When was the debt incurred? **Opened 05/15** Ste 700 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney The Medical Care** Other. Specify ☐ Yes Group Ltd. 4.3 **Merchants Credit** \$333.00 2416 Last 4 digits of account number Nonpriority Creditor's Name 223 W Jackson Blvd When was the debt incurred? **Opened 05/15** Ste 700 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney The Medical Care** ☐ Yes Other. Specify Group Ltd. 4.3 **Merchants Credit** 5425 \$213.00 Last 4 digits of account number Nonpriority Creditor's Name 223 W Jackson Blvd When was the debt incurred? Opened 8/06/14 Ste 700 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney The Medical Care** Other. Specify Group Ltd. ☐ Yes

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Debtor 1 Toymesha N Sanders Case number (if know) 4.3 **Merchants Credit** 5426 \$73.00 Last 4 digits of account number 5 Nonpriority Creditor's Name 223 W Jackson Blvd When was the debt incurred? Opened 8/06/14 Ste 700 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney The Medical Care** Other. Specify ☐ Yes Group Ltd. 4.3 0080 \$196.00 Miramed Revenue Group Last 4 digits of account number Nonpriority Creditor's Name 991 Oak Creek Dr When was the debt incurred? Opened 3/15/17 Lombard, IL 60148 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not debt report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Northwest Community Hospital** Other. Specify 4.3 Miramed Revenue Group 8104 \$142.00 Last 4 digits of account number Nonpriority Creditor's Name 991 Oak Creek Dr When was the debt incurred? Opened 11/16/16 Lombard, IL 60148 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Northwest Community Hospital ☐ Yes

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Debioi	l oymesna N Sanders		Case number (if know)	
4.3	Miramed Revenue Group	Last 4 digits of account number	5299	\$63.00
	Nonpriority Creditor's Name 991 Oak Creek Dr	When was the debt incurred?	Opened 11/03/16	
	Lombard, IL 60148		<u> </u>	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Northwest	Community Hospital	
4.3	Pro Collect, Inc	Last 4 digits of account number	1046	\$0.00
	Nonpriority Creditor's Name 12170 N. Abrams Rd, Ste 100 Dallas, TX 75243	When was the debt incurred?	Opened 8/27/13	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Notice Pur	poses Only	
4.4	Stellar Recovery Inc	Last 4 digits of account number	8615	\$308.00
	Nonpriority Creditor's Name	_		
	Attn: Bankruptcy 4500 Salisbury Road Ste 105 Jackonville, FL 32216	When was the debt incurred?	Opened 3/06/17	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	- '	
	□Yes	■ Other. Specify 11 Charter	Communications	

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DODE	Toymesha N Sanders		Case Hamber (II know)					
4.4 1	The Affiliated Group I	Last 4 digits of account number	5741	\$137.00				
	Nonpriority Creditor's Name 3055 41st St Nw Ste 100 Rochester, MN 55901	When was the debt incurred?	Opened 12/14					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only							
	☐ At least one of the debtors and another	•						
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims						
	■ No	Debts to pension or profit-sharing						
	Yes	■ Other. Specify Returned Conc.	heck Roundy S Supermarkets					
4.4	The Affiliated Group I	Last 4 digits of account number	9443	\$80.00				
	Nonpriority Creditor's Name 3055 41st St Nw Ste 100 Rochester, MN 55901	When was the debt incurred?	Opened 12/14					
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply					
	Who incurred the debt? Check one.							
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure						
	☐ Check if this claim is for a community debt	Student loans						
	Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims						
	No	Debts to pension or profit-sharing	- ·					
	Yes	■ Other. Specify Returned Colnc.						
4.4 3	The Affiliated Group I	Last 4 digits of account number	9449	\$77.00				
	Nonpriority Creditor's Name 3055 41st St Nw Ste 100 Rochester, MN 55901	When was the debt incurred?	Opened 12/14					
	Number Street City State Zlp Code	As of the date you file, the claim						
	Who incurred the debt? Check one.							
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure						
	Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims						
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
		_ Returned Check Roundy S Supermarkets						
	☐ Yes	Other. Specify Inc.	o oupormaniono					

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Debtor 1 Toymesha N Sanders Case number (if know) 4.4 The Affiliated Group I 9453 \$76.00 Last 4 digits of account number Nonpriority Creditor's Name 3055 41st St Nw Ste 100 When was the debt incurred? **Opened 12/14** Rochester, MN 55901 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Returned Check Roundy S Supermarkets ☐ Yes Other. Specify 4.4 8412 \$362.00 **Transworld System Inc** Last 4 digits of account number Nonpriority Creditor's Name 2235 Mercury Way When was the debt incurred? **Opened 03/15** Ste 275 Santa Rose, CA 95407 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not debt report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney Auto Club Group ☐ Yes 4.4 Transworld System Inc 7610 \$75.00 Last 4 digits of account number Nonpriority Creditor's Name 2235 Mercury Way When was the debt incurred? **Opened 03/15** Ste 275 Santa Rose, CA 95407 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Auto Club Group ☐ Yes

Document Page 36_of 68 Debtor 1 Toymesha N Sanders Case number (if know)

Western Control Servic	Last 4 digits of account number	7Q9K	\$563.00
Nonpriority Creditor's Name Po Box 1352	When was the debt incurred?	Opened 2/29/14	
Englewood, CO 80150	when was the debt incurred?	Opened 3/28/14	
Number Street City State ZIp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	I claim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans		
	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	Debts to pension or profit-sharin	to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Collection Attorney Baker University		

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	· —	
	ou.	Other. Add all other phonty disecured claims. Write that amount here.	ou.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	72,040.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	21,292.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	93,332.00

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Toymesha N Sanders First Name Middle Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known)	Fill in this information to identify your case:				
Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number	Debtor 1	Toymesha N San	ders		
(Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number		First Name	Middle Name	Last Name	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number	Debtor 2				
Case number	(Spouse if, filing)	First Name	Middle Name	Last Name	
	United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
(if known)	Case number				
	(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Jerry Ortiz
P.O. Box 31442
Chicago, IL 60631

State what the contract or lease is for
Lease

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		Docume	ent Page 38 d	ot 68	
Fill in this	information to identify your	case:			
Debtor 1	Toymocho N Con	doro			
Debioi i	Toymesha N Sar	Middle Name	Last Name		
Debtor 2					
(Spouse if, fili	ng) First Name	Middle Name	Last Name	_	
United Sta	ites Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case num (if known)	ber				– 0. 1.74
(II KIIOWII)					Check if this is an amended filing
					amenaea ming
Officia	l Form 106H				
		lobtoro			4044
sched	lule H: Your Cod	eptors			12/15
No Yes 2. With Arizon No. Yes 3. In Col	hin the last 8 years, have you ha, California, Idaho, Louisiana Go to line 3. S. Did your spouse, former spouts and your spouse, former spouts and your codeb	u lived in a community progression, Nevada, New Mexico, Puuse, or legal equivalent live	roperty state or territo lerto Rico, Texas, Wash e with you at the time?	ry? (Community propert nington, and Wisconsin.) r if your spouse is filin	
Form					Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor			Column 2: The cre	editor to whom you owe the debt
	Name, Number, Street, City, State and Z	IP Code		Check all schedule	es that apply:
2.4				Cabadula D lia	_
3.1	Name			☐ Schedule D, lin	
				☐ Schedule E/F, I	
				☐ Schedule G, lin	e
	Number Street	0	710.0		
	City	State	ZIP Code		
				Под 11 5 %	
3.2	Name			Schedule D, lin	
				☐ Schedule E/F, I	
				☐ Schedule G, lin	е
	Number Street	State	7ID Code		
	City	State	ZIP Code		

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Fill	in this information to identify your o	ase.						
	otor 1 Toymesha I							
	otor 2 puse, if filing)							
Uni	ted States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF ILLINOIS					
	se number nown)		-		☐ An		ū	ostpetition chapter ving date:
_	fficial Form 106I				MN	// DD/ Y	YYY	
S	chedule I: Your Inc	ome						12/15
sup spo atta	as complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form. **Describe Employment**	are married and not filing wi	ng jointly, and your s ith you, do not includ	pouse is liv le informati	ing with y on about y	ou, inclu our spo	ude informati use. If more	on about your space is needed,
1.	Fill in your employment information.		Debtor 1	Debtor 1 Debt		Debtor 2	or non-filing	spouse
	If you have more than one job,	Employment status	■ Employed	■ Employed		☐ Emplo	•	
	attach a separate page with information about additional	Zimpioyimom otatao	☐ Not employed			☐ Not er	nployed	
	employers.	Occupation	Sr. Account Exe	cutive				
	Include part-time, seasonal, or self-employed work.	Employer's name	UPS					
	Occupation may include student or homemaker, if it applies.	Employer's address	636 E Sandy Lak Coppell, TX 750					
		How long employed t	here? 5 yrs					
Pai	t 2: Give Details About Mo	nthly Income						
	mate monthly income as of the duse unless you are separated.	late you file this form. If	you have nothing to re	port for any	line, write S	\$0 in the	space. Includ	e your non-filing
	u or your non-filing spouse have m e space, attach a separate sheet to		ombine the information	for all empl	oyers for th	nat perso	n on the lines	below. If you need
					For Debt	or 1	For Debtor	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2. \$	4,9	05.00	\$	N/A
3.	Estimate and list monthly over	time pay.		3. +\$		0.00	+\$	N/A

4,905.00

\$

N/A

Calculate gross Income. Add line 2 + line 3.

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Copy line 4 here 4. \$ 4,905.00 \$ N/A 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. No one standard or contributions for retirement fund loans 5d. Required repayments of retirement fund loans 5d. Social S	Deb	otor 1	Toymesha N Sanders		С	ase	number (if known)				
5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. 0.00 \$ N/A 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ N/A 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ N/A 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ N/A 5c. Nomestic support obligations 5d. \$ 40,00 \$ N/A 5d. Insurance 5d. \$ 301.00 \$ N/A 5d. Insurance 5d. \$ 0.00 \$ N/A 5d. Other deductions. Specify: USPAC Contribution 5d. \$ 0.00 \$ N/A 5d. Other deductions. Specify: USPAC Contribution 5d. \$ 0.00 \$ N/A 5d. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6d. \$ 1,374.00 \$ N/A 7d. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7d. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7d. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7d. \$ 3,531.00 \$ N/A 8d. List all other income regularly received: 8a. Net income from retall property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive income the supplement. 8c. \$ 0.00 \$ N/A 8d. \$ 0.00 \$ N/A						For		n	on-filing s	pouse	
5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Social Security 5c. Nonestic support obligations 5c. Social Security 5c. Insurance 5c. Social Security 5c. Domestic support obligations 5c. Social Security 6c. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6c. Social Security		Сор	y line 4 here	4.		\$_	4,905.00	\$	·	N/A	-
55. Mandatory contributions for retirement plans 5c. Voluntary contributions 5	5.	List	all payroll deductions:								
5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5d. So. Insurance 5d. So. \$301.00 \$ N/A 5d. Domestic support obligations 5d. Volunin dues 5d. Voluni		5a.		5a.		_	809.00				
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51. Domestic support obligations 59. Union dues 59. 0.00 \$ N/A 10. Other deductions. Specify: USPAC Contribution 50. 0.00 \$ N/A 10. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 0.00 \$ N/A 10. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 3,531.00 \$ N/A 10. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 3,531.00 \$ N/A 10. Calculate total monthly take-home pay. Subtract line 6 from line 4. 10. Calculate total monthly take-home pay. Subtract line 6 from line 4. 11. List all other income regularly receives 12. List all other sepant groups and from operating a business, profession, or farm 12. Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 13. Bib. Interest and dividends 14. Sepant groups and the state of the sepant groups of the sepant gr						. —					-
5g. Union dues 5g. USPAC Contribution 5h. Other deductions. Specify: USPAC Contribution 5h. S 6.00 + \$ N/A N/A Car Insurance 5 3.00 \$ N/A 155.00 \$ N/A 155.00 \$ N/A Car Insurance 5 1,374.00 \$ N/A Car Insurance 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 1,374.00 \$ N/A 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 3,531.00 \$ N/A 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm. Altach is adarbier for each property and business showing gross received include alimonthy net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8e. \$ 0.00 \$ N/A 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: Projected Ave Monthly Net Bonus 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 700.00 \$ N/A 10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 700.00 \$ N/A 11. +\$ 0.00 12. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 13. Do you expect an increase or decrease within the year after you file this form? 14. \$ 4,231.00 Combined monthly income.						*					-
5h. Other deductions. Specify: USPAC Contribution Linited Way Car Insurance Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. But Include a line of the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. But It income regularly received: But It income regularly received: But Include almonthy take-nome pay. Subtract line 6 from line 4. But Income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. But Interest and dividends But Include almony, spousal support, child support, maintenance, divorce settlement, and property settlement. But Interest and dividends But Include almony, spousal support, child support, maintenance, divorce settlement, and property settlement. But Interest and dividends But Include almony, spousal support, child support, maintenance, divorce settlement, and property settlement. But Interest and dividends But Include almony, spousal support, delide support, maintenance, divorce settlement, and property settlement. But Interest and dividends But Include almony, spousal support, delide support, maintenance, divorce settlement, and property settlement. But Include cash assistance that you regularly receive line the supplemental hutten Assistance and the value (if known) of any non-cash assistance hutten Assistance Program) or housing subsidies. But It Include cash assistance Program) or housing subsidies. But It Include cash assistance Program) or housing subsidies. But It Include contribution from on a unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your depend		_									
United Way Car Insurance 8		-		-		· —					-
Car Insurance Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 1,374,00 \$ N/A 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 3,531.00 \$ N/A 8. List all other income regularly received: 8. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: Projected Ave Monthly Net Bonus 8h. * 700.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 700.00 \$ N/A 10. Calculate monthly income. Add lines 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Combined Combined Combined No.		011.				• —					=
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5l+5g+5h. 6. \$ 1,374.00 \$ NI/A 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 3,531.00 \$ NI/A 8. List all other income regularly received: 8a. Not income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ NI/A 8e. Social Security 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive; such as flood stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: Projected Ave Monthly Net Bonus 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 700.00 \$ NI/A 10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 700.00 \$ NI/A 11. **Sate all other regular contributions to the expenses that you list in *Schedule J.** Include contributions from an unmarrised partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in *Schedule J.** Specify: 11. **Secify: 11. ** ** ** ** ** ** ** ** ** ** ** ** **			·	_							-
7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8. Interest and dividends 8. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settement, and property settlement. 8. Unemployment compenty settlement. 8. Social Security 8. Social Security 8. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8. Pension or retirement income 8. \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 700.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. 10. \$ 4,231.00 + \$ N/A \$ 4,231.00 + \$ N/A \$ 4,231.00 \$ N/A 11. \$ 5 N/A 12. State all Other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. 12. De not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. 12. \$ 4,231.00 Combined monthly income. 13. Do you expect an increase or decrease within the year after you file this form?	6	Add		_ 	9	· —					-
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8h. Other monthly income. Specify: Projected Ave Monthly Net Bonus 8h.+ \$ 700.00 + \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 700.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. 10. \$ 4,231.00 + \$ N/A = \$ 4,231.00		8a.	· · · · · · · · · · · · · · · · · · ·	_		_					-
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 700.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No.		-									-
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11. State all other regular contributions to the expenses that you list in <i>Schedule J</i> . Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities</i> and Related <i>Data</i> , if it applies No. Do you expect an increase or decrease within the year after you file this form? No.	10.		•	10.	Φ_		4,231.00 + 5_		N/A	= • -	4,231.00
Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 4,231.00 Combined monthly income No.	11.	Stat Inclu othe Do r	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a	depe			•		n <i>Schedule</i>		0.00
13. Do you expect an increase or decrease within the year after you file this form? No.	12.	Writ	e that amount on the Summary of Schedules and Statistical Summary of Certain						it		ned
	13.	Do y		?						monthly	y mcome
		_									

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Fill	in this informa	tion to identify ye	our case:					
Deb	otor 1	Toymesha N	l Sanders	3		Che	eck if this is:	
Deh	otor 2						An amended filing	wing postpetition chapter
	ouse, if filing)						13 expenses as of	
Unit	ted States Bankr	ruptcy Court for the	: NORTH	ERN DISTRICT OF ILLIN	IOIS		MM / DD / YYYY	
	se number nown)							
O	fficial Fo	rm 106J				J		
		J: Your	Evnor	1606				12/15
Be	as complete a ormation. If m mber (if know t 1: Descr	and accurate as ore space is ne n). Answer eve ibe Your House	s possible eded, atta ry questio	. If two married people a ch another sheet to this				or supplying correct
1.	Is this a joir	nt case?						
	■ No. Go to □ Yes. Doe		in a separ	ate household?				
	□ N □ Y	_	st file Offici	al Form 106J-2, <i>Expense</i>	s for Separate House	ehold of Del	btor 2.	
2.	Do you have	e dependents?	□ No					
	Do not list Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Son		15	■ Yes
					C		16	□ No
					Son			■ Yes □ No
								☐ No
								□ No
								☐ Yes
3.	expenses of	penses include f people other t d your depende	:han _	No Yes				
Par		ate Your Ongoi						
exp				uptcy filing date unless y y is filed. If this is a sup				
the	value of sucl	n assistance an		government assistance cluded it on Schedule I:			Your exp	enses
(Of	ficial Form 10	וסו.)					Tour exp	0000
4.	The rental of payments ar	or home owners and any rent for th	ship expense ground o	ses for your residence. or lot.	Include first mortgag	e 4.	\$	1,495.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
	4b. Prope	rty, homeowner'	s, or renter	's insurance		4b.	\$	0.00
			•	upkeep expenses		4c.	:	60.00
_		owner's associa				4d.	\$	0.00
5	Additional r	nortgage pavm	ents for vo	our residence , such as ho	me equity loans	5	.h	0.00

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Debtor 1	Toymesha N Sanders	Case num	ber (if known)	
S. Util	ities:			
6a.	Electricity, heat, natural gas	6a.	\$	200.00
6b.	Water, sewer, garbage collection	6b.	· · · · · · · · · · · · · · · · · · ·	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	·	211.00
6d.	Other. Specify: Cable Bundle	6d.		160.00
	d and housekeeping supplies	— 7.	· -	
		7. 8.	·	800.00
_	Idcare and children's education costs		\$	100.00
	thing, laundry, and dry cleaning	9.	\$	100.00
	sonal care products and services	10.		75.00
	dical and dental expenses	11.	\$	120.00
	nsportation. Include gas, maintenance, bus or train fare. not include car payments.	12.	\$	350.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	ritable contributions and religious donations	14.	· -	0.00
	urance.	1-7.	*	0.00
	not include insurance deducted from your pay or included in lines 4 or 20.			
	. Life insurance	15a.	\$	0.00
	. Health insurance	15b.	·	0.00
	. Vehicle insurance	15c.	·	0.00
	. Other insurance. Specify:	15d.	· ·	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.	130.	*	0.00
	cify:	16.	\$	0.00
	allment or lease payments:			
	. Car payments for Vehicle 1	17a.	\$	360.00
17b	. Car payments for Vehicle 2	17b.	\$	0.00
17c	. Other. Specify:	17c.	\$	0.00
17c	. Other. Specify:	17d.	\$	0.00
	r payments of alimony, maintenance, and support that you did not report as		•	0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.		0.00
	er payments you make to support others who do not live with you.		\$	0.00
	cify:	19.		
	er real property expenses not included in lines 4 or 5 of this form or on Scheo			
	. Mortgages on other property	20a.		0.00
20b	. Real estate taxes	20b.	•	0.00
200	. Property, homeowner's, or renter's insurance	20c.	\$	0.00
200	. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e	. Homeowner's association or condominium dues	20e.	\$	0.00
. Oth	er: Specify:	21.	+\$	0.00
2 0-1				
	culate your monthly expenses		•	4 004 00
	. Add lines 4 through 21.		\$	4,031.00
	. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
220	. Add line 22a and 22b. The result is your monthly expenses.		\$	4,031.00
3. Cal	culate your monthly net income.		L	
	. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	4,231.00
	. Copy your monthly expenses from line 22c above.	23b.		4,031.00
		200.	Ť	-1,001.00
230	. Subtract your monthly expenses from your monthly income.	00.	•	200.00
	The result is your monthly net income.	23c.	\$	200.00
4 Do	you expect an increase or decrease in your expenses within the year after you	u file this	form?	
	example, do you expect to finish paying for your car loan within the year or do you expect your			or decrease because o
	ification to the terms of your mortgage?	3-3-1		
	No.			
	/es. Explain here:			
_	, co. Explain note.			

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Fill in this info	rmation to identify your	case:			
Debtor 1	Toymesha N San	ders			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	Bankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		
Case number (if known)					☐ Check if this is an amended filing
Official For	m 106Dec				
Declara	tion About a	n Individua	l Debtor's Sc	hedules	12/15
obtaining mone years, or both.		n connection with a ban			nent, concealing property, or or imprisonment for up to 20
Did you p	ay or agree to pay some	one who is NOT an atto	rney to help you fill out b	ankruptcy forms?	
■ No					
☐ Yes.	Name of person				uptcy Petition Preparer's Notice, and Signature (Official Form 119)
	alty of perjury, I declare are true and correct.	that I have read the sur	nmary and schedules file	d with this declaration	and
X /s/ To	ymesha N Sanders		X		
	esha N Sanders ure of Debtor 1		Signature of	Debtor 2	

Date

Date June 9, 2017

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	Toymesha N San	ders		
John O	First Name	Middle Name	Last Name	
Debtor 2 Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bank	kruptcy Court for the:	NORTHERN DISTRICT OF ILLI	NOIS	
Case number				
if known)				Check if this is an amended filing
Official For	m 107			
		Affairs for Individual	s Filing for Bankruptc	y 4/1
nformation. If mo		attach a separate sheet to this fo	ng together, both are equally respon rm. On the top of any additional pag	
<u> </u>	• •	ital Status and Where You Lived	Before	
. What is your	current marital status	s?		
■ Married□ Not marri	ied			
. During the las	st 3 years, have you li	ived anywhere other than where	vou live now?	
_				
П Мо		•	,	
□ No ■ Yes. List	all of the places you liv	ved in the last 3 years. Do not inclu	•	
_		•	•	Dates Debtor 2 lived there
Pes. List Debtor 1 Prio		ved in the last 3 years. Do not inclu Dates Debtor 1	de where you live now.	
Debtor 1 Price 3015 Lynn Arlington H	or Address:	ved in the last 3 years. Do not inclu Dates Debtor 1 lived there From-To:	de where you live now. Debtor 2 Prior Address:	lived there ☐ Same as Debtor 1
Debtor 1 Price 3015 Lynn Arlington H	cor Address: Court Unit D deights, IL 60005 enwood Ave deights, IL 60004 Bend Drive	Dates Debtor 1 lived there From-To: 2016 to 2017	de where you live now. Debtor 2 Prior Address: Same as Debtor 1	lived there ☐ Same as Debtor 1 From-To: ☐ Same as Debtor 1

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Case 17-17751 Document Page 45 of 68 ase number (if known) Debtor 1 Toymesha N Sanders Part 2 **Explain the Sources of Your Income** Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) From January 1 of current year until \$30,600.00 ☐ Wages, commissions, ■ Wages, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For last calendar year: \$58,251.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. П Yes. Fill in the details. Debtor 2 Debtor 1 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts.

□ No.

List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address Dates of payment **Total amount** Amount you Was this payment for ... still owe paid

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

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Debtor 1 Toymesha N Sanders

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
	Honor Finance 909 Davis St Ste 260 Evanston, IL 60201	April to June	\$1,170.00	\$11,500.00	☐ Mortgage ■ Car ☐ Credit Ca ☐ Loan Rep ☐ Suppliers ☐ Other	urd payment
7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	rtners; relatives of any gen control, or owner of 20% o	eral partners; partner r more of their voting	erships of which yo g securities; and a	u are a genera ny managing a	al partner; corporations gent, including one for
	No					
	☐ Yes. List all payments to an insider. Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
Par	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider Insider's Name and Address Identify Legal Actions, Repossession	igned by an insider. Dates of payment	Total amount paid	Amount you still owe		this payment
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.					
	■ No □ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11.	cy, was any of your prope v.	rty repossessed, f	oreclosed, garnis	shed, attached	I, seized, or levied?
	Yes. Fill in the information below. Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened	I			
	Daniel Lee	Wages ☐ Property was reposse ☐ Property was foreclos ☐ Property was garnishe	ed.	Feb	to June	\$2,950.00
		☐ Property was attached	d, seized or levied.			

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Debtor paid \$310 filing fee and \$33

attorney fees the balance of which

credit report fee and \$0 towards

(\$4,000) shall be paid in the plan

\$0.00

Cutler & Associates, Ltd 4131 Main Street

Skokie, IL 60076

david@cutlerltd.com

June 2017

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Debtor 1 Toymesha N Sanders

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and v transferred	alue of any pro	perty	Date payment or transfer was made	Amount of payment
	Credit Counseling				June 2017	\$14.95
17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you li No Yes. Fill in the details.	or to make payments			r transfer any proper	ty to anyone who
	Person Who Was Paid Address	Description and v transferred	alue of any pro	perty	Date payment or transfer was made	Amount of payment
	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus Include both outright transfers and transfers made include gifts and transfers that you have already I No Yes. Fill in the details.	iness or financial affa e as security (such as t	airs? he granting of a			
	Person Who Received Transfer Address	Description and v			any property or received or debts change	Date transfer was made
19.	Within 10 years before you filed for bankruptc beneficiary? (These are often called asset-prote No Yes. Fill in the details.	ction devices.)				
Par	Name of trust List of Certain Financial Accounts, Instr	Description and v uments, Safe Deposit		•	ea	Date Transfer was made
	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associa No Yes. Fill in the details.	other financial accour	nts; certificates	of deposit; sh		
	Name of Financial Institution and	ast 4 digits of ccount number	Type of accou instrument	clo mo	re account was sed, sold, ved, or nsferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed for	bankruptcy, an	y safe deposit	box or other deposit	tory for securities,
	NoYes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the	contents	Do you still have it?

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22.	Have you stored property in a storage unit or p	place other than your home within 1	year before you filed for bankruptcy	?
	■ No □ Yes. Fill in the details.			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Par	9: Identify Property You Hold or Control for	·		
23.	Do you hold or control any property that some for someone.	one else owns? Include any proper	ty you borrowed from, are storing fo	r, or hold in trust
	■ No □ Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Par	10: Give Details About Environmental Inform	nation		
For	he purpose of Part 10, the following definitions	s apply:		
	Environmental law means any federal, state, on toxic substances, wastes, or material into the regulations controlling the cleanup of these su	air, land, soil, surface water, ground		
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa		law, whether you now own, operate,	or utilize it or used
	<i>Hazardous material</i> means anything an enviror hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic	substance,
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of wher	they occurred.	
24.	Has any governmental unit notified you that yo	ou may be liable or potentially liable	under or in violation of an environm	ental law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of an	zIP Code) y release of hazardous material?		
	■ No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or admin	istrative proceeding under any envi	ronmental law? Include settlements	and orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	11: Give Details About Your Business or Con	nnections to Any Business		
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have an	y of the following connections to an	y business?
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity,	either full-time or part-time	
	☐ A member of a limited liability company	y (LLC) or limited liability partnersh	ip (LLP)	

Entered 06/09/17 18:14:52 Case 17-17751 Doc 1 Filed 06/09/17 Document Page 50 of 68 ase number (if known) Debtor 1 Toymesha N Sanders ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Toymesha N Sanders Signature of Debtor 2 Tovmesha N Sanders Signature of Debtor 1 **Date** Date June 9, 2017 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	r 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.

□The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$0.00 toward the flat fee, leaving a balance due of \$4,000.00; and \$0.00 for expenses, leaving a balance due for the filing fee of \$0.00.
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date:	ppeur in court to object.	
Signed:		
/s/ Toymesha N Sanders	/s/ David H. Cutler	
Toymesha N Sanders	David H. Cutler	
	Attorney for the Debtor(s)	
Debtor(s)		
Do not sign this agreement if the amounts are	blook	
Do not sign this agreement if the amounts are	DIAIIK.	

Local Bankruptcy Form 23c

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	re Toymesha N Sanders		Case No.		
		Debtor(s)	Chapter	13	
	DISCLOSURE OF COMPENSATI	ON OF ATTORN	NEY FOR DE	EBTOR(S)	
c	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I cert compensation paid to me within one year before the filing of the perendered on behalf of the debtor(s) in contemplation of or in contemplation.	petition in bankruptcy, or	agreed to be paid	to me, for services	
	For legal services, I have agreed to accept		\$	4,000.00	
	Prior to the filing of this statement I have received			0.00	
	Balance Due		\$	4,000.00	
2. \$	\$310.00 of the filing fee has been paid.				
3. T	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. T	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5. I	■ I have not agreed to share the above-disclosed compensation	with any other person un	less they are mem	bers and associates	of my law firm.
I	☐ I have agreed to share the above-disclosed compensation with copy of the agreement, together with a list of the names of the				y law firm. A
6. I	In return for the above-disclosed fee, I have agreed to render legal	l service for all aspects of	of the bankruptcy of	ase, including:	
b c	 a. Analysis of the debtor's financial situation, and rendering advi b. Preparation and filing of any petition, schedules, statement of c. Representation of the debtor at the meeting of creditors and co d. [Other provisions as needed] Negotiations with secured creditors to reduce to reaffirmation agreements and applications as no 522(f)(2)(A) for avoidance of liens on household 	affairs and plan which m onfirmation hearing, and a o market value; exem eeded; preparation a	ay be required; any adjourned hea option planning;	rings thereof;	d filing of
7. E	By agreement with the debtor(s), the above-disclosed fee does not	t include the following se	ervice:		
	CERT	TIFICATION			
	I certify that the foregoing is a complete statement of any agreement bankruptcy proceeding.	ent or arrangement for pa	syment to me for re	epresentation of the	e debtor(s) in
Jι	June 9, 2017	/s/ David H. Cutler			
	Date	David H. Cutler Signature of Attorney Cutler & Associates 4131 Main Street Skokie, IL 60076	s, Ltd		

847-673-8600 Fax: 847-673-8636

david@cutlerItd.com
Name of law firm

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United States Bankruptcy Court Northern District of Illinois

In re	Toymesha N Sanders	P.1: ()	Case No.	
		Debtor(s)	Chapter 13	
	VEI	RIFICATION OF CREDITOR MA	ATRIX	
		Number of C	Creditors:	50
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credito	ors is true and correct to the	ne best of my
Date:	June 9, 2017	/s/ Toymesha N Sanders Toymesha N Sanders Signature of Debtor		

AMCOL Systems, Inc. Amcol Systems, Inc. Po Box 21625 Columbia, SC 29221

AMCOL Systems, Inc. Amcol Systems, Inc. Po Box 21625 Columbia, SC 29221

Choice Recovery Inc 1550 Old Henderson Rd Ste 100 Columus, OH 43220

Choice Recovery Inc 1550 Old Henderson Rd Ste 100 Columus, OH 43220

Credit Acceptance 25505 West 12 Mile Rd Suite 3000 Southfield, MI 48034

Credit Collections Svc Po Box 773 Needham, MA 02494

Credit Management, LP
The Offices of Credit Management, LP
Po Box 118288
Carrolton, TX 75011

Credit Systems International, Inc 1277 Country Club Lane Fort Worth, TX 76112

Daniel J. Lee c/o Kimberly J. Weissman, LLC 633 Skokie Blvd Suite 400 Northbrook, IL 60062

Dept Of Ed/Navient Attn: Claims Dept P.O. Box 9635 Wilkes Barr, PA 18773 Dept Of Ed/Navient Attn: Claims Dept P.O. Box 9635 Wilkes Barr, PA 18773

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Diversified Consultant Dci Po Box 551268 Jacksonville, FL 32255

Eecu 1617 W 7th St Fort Worth, TX 76102

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Mercantile Adjustment Bureau 165 Lawrence Bell Dr Ste 100 Williamsville, NY 14221

Merchants Credit 223 W Jackson Blvd Ste 700 Chicago, IL 60606

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Miramed Revenue Group 991 Oak Creek Dr Lombard, IL 60148 Miramed Revenue Group 991 Oak Creek Dr Lombard, IL 60148

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Pro Collect, Inc 12170 N. Abrams Rd, Ste 100 Dallas, TX 75243

Stellar Recovery Inc Attn: Bankruptcy 4500 Salisbury Road Ste 105 Jackonville, FL 32216

The Affiliated Group I 3055 41st St Nw Ste 100 Rochester, MN 55901

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Transworld System Inc 2235 Mercury Way Ste 275 Santa Rose, CA 95407

Transworld System Inc 2235 Mercury Way Ste 275 Santa Rose, CA 95407 Western Control Servic Po Box 1352 Englewood, CO 80150